

Arkansas Contractors Licensing Board

4100 Richards Road, North Little Rock, AR 72117

Phone 501-372-4661

Fax 501-372-2247

Home Improvement License Amended Specialties Request Form

Today's Date: _____

1. ID Number as it appears on the license: _____
2. Name as it appears on current license: _____
3. Phone Number: _____

What Specialty(s) do you want to add?

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____
9. _____
10. _____
11. _____
12. _____

Complete the “**Experience Information**” page attached listing the experience for each **specialty(s)** requested.

If there is no experience listed under (TYPE OF WORK) no specialty(s) will be approved.

Example: Specialty you want to add is concrete. Project 1 on the “**Experience Information**” where is asks **Type of Work** you will list some kind of concrete work such as a slab for a building, a parking lot, some sidewalks, etc.

The more references the better but send at least three references for each specialty you wish to add. If you need more sheets you may run copies.

This may be faxed or mailed to the address or fax number above.

“Residential Specialties”

Residential Remodeler

(This classification includes all of the specialties that are listed below along with additions to homes.)

Specialties: A contractor may obtain one or more of the Specialties by showing proper experience for each specialty requested.

The Specialties are:

Awnings, Canopies
Base & Paving
 a. Base Construction
 b. Hot & Cold Mixes
 c. Surface Treatment
 d. Asphalt
 e. Concrete Paving
Boat Docks
Carpentry, Framing, Millwork, Cabinets
Ceilings, Wall Systems, Acoustical Treatments
Chimneys, Fireplaces
Communication, Computer or Sound Systems, Cabling
Concrete
Countertops
Central Vacuum Systems
Demolition
Detached Garage, Storage Building, Detached Structures
Drywall
Excavation
Fencing, Gates
Floors, Floor Covering
Foundation Construction or Drilling, Pile Driving, Stabilization
Glass, Glazing, Doors, Windows, Hardware
Grading & Drainage (Including Grading, Drainage, Pipe & Structures,
 Culverts, Clearing, Grubbing & Rip Rap)
Greenhouses, Sunrooms
Insulation
Kitchen, Bathroom Renovations
Landscaping, Irrigation, Lawn Sprinkler Systems, Streams
Lathe, Plaster, Stucco, Dryvit, EIFS
Masonry
Metal Studs, Walls
Overhead Doors
Painting, Wallcovering
Rebar
Retaining Walls
Roofing, Roof Decks
Siding, Soffit, Facia, Gutters
Skylights, Solar Systems
Special Coatings or Applications, Caulking, Waterproofing
Steel, Alloy, Ornamental, Metal Fabrication, Welding
Swimming Pools, Spas
Tile, Terrazzo, Marble

Experience Information

(If additional space is needed please attach separately.)

ANSWER ALL OF THE FOLLOWING QUESTIONS

Project #1

Date construction was started _____

Date construction was completed _____

Owner's name _____

Owner's address _____

Type of Work _____

Location of construction _____

County _____

City _____

State _____

Project #3

Date construction was started _____

Date construction was completed _____

Owner's name _____

Owner's address _____

Type of Work _____

Location of construction _____

County _____

City _____

State _____

Project #5

Date construction was started _____

Date construction was completed _____

Owner's name _____

Owner's address _____

Type of Work _____

Location of construction _____

County _____

City _____

State _____

Project #2

Date construction was started _____

Date construction completed _____

Owner's name _____

Owner's address _____

Type of Work _____

Location of construction _____

County _____

City _____

State _____

Project #4

Date construction was started _____

Date construction was completed _____

Owner's name _____

Owner's address _____

Type of Work _____

Location of construction _____

County _____

City _____

State _____